Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 1 of 51

| Fill in this information to identify your c | ase: | |
|---|---|--------------------------------------|
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|---|--|---|
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, | Shela First Name | First Name |
| | your driver's license or passport). | Middle Name | Middle Name |
| | | Rangoonwala | |
| | Bring your picture identification to your meeting | Last Name | Last Name |
| | with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you | | |
| | have used in the last 8 years | First Name | First Name |
| | Include your married or | Middle Name | Middle Name |
| | maiden names. | Last Name | Last Name |
| 3. | Only the last 4 digits of | | |
| | your Social Security | $xxx - xx - \underline{6} \underline{2} \underline{5} \underline{5}$ | xxx - xx |
| | number or federal Individual Taxpayer | OR | OR |
| | Identification number | 9xx - xx - | 9xx - xx - |

(ITIN)

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 2 of 51

| Del | otor 1 | Shela Rangoonwala | | | Case | e number (if known) | |
|-----|--------------------|--|-------------------------|--|--------|------------------------------|---|
| | | | Abo | out Debtor 1: | | About Debtor 2 (S | pouse Only in a Joint Case): |
| 4. | and Em | | | I have not used any business names or EI | Ns. | ☐ I have not use | d any business names or EINs. |
| | (EIN) y | cation Numbers ou have used in t 8 years | Bus | ness name | = | Business name | |
| | | trade names and | Bus | ness name | _ | Business name | _ |
| | doing b | usiness as names | Bus | ness name | _ | Business name | |
| | | | | | | | |
| | | | EIN | _ | | EIN _ | |
| | | | EIN | | • | EIN | |
| 5. | Where | you live | | | | If Debtor 2 lives at | a different address: |
| | | | 612 Nun | 27 N Seeley | _ | Number Street | |
| | | | · · · | | | Trained Career | |
| | | | | | | | |
| | | | Ch | icago IL 60659 | _ | | |
| | | | City | State ZIP Code | _ | City | State ZIP Code |
| | | | Cou Cou | | _ | County | |
| | | | If y | our mailing address is different from | | If Debtor 2's mailir | ng address is different |
| | | | | one above, fill it in here. Note that the rt will send any notices to you at this ling address. | | | n here. Note that the court es to you at this mailing |
| | | | Nun | ber Street | _ | Number Street | |
| | | | P.O | Вох | _ | P.O. Box | |
| | | | City | State ZIP Code | _ | City | State ZIP Code |
| 6. | | ou are choosing | Che | eck one: | | Check one: | |
| | this dis bankru | strict to file for ptcy | Ø | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | 180 days before filing this e lived in this district longer ner district. |
| | | | | I have another reason. Explain. (See 28 U.S.C. § 1408.) | | I have another (See 28 U.S.C | r reason. Explain. C. § 1408.) |
| Р | art 2: | Tell the Court Ab | out Y | our Bankruptcy Case | | | |
| 7. | The ch | apter of the | Chec | k one: (For a brief description of each, see | Notice | Required by 11 II | S.C. 8 342(h) for Individuals Filipa |
| ٠. | Bankru | ptcy Code you | | ankruptcy (Form 2010)). Also, go to the top | | | |
| | are cho under | oosing to file | $\overline{\mathbf{V}}$ | Chapter 7 | | | |
| | | | | Chapter 11 | | | |
| | | | | Chapter 12 | | | |
| | | | _ | Chapter 13 | | | |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 3 of 51

| Debtor 1 Shela Rangoonwala | | | Case num | nber (if known) | | | | |
|----------------------------|--|----------|---------------------|--|---|--------------------------|---|---|
| 8. | How you will pay t | he fee | cou pay | rt for more details a with cash, cashier | about how you may pay. | Typicall r. If your | y, if you are pay attorney is subr | e clerk's office in your local ing the fee yourself, you may nitting your payment on your ted address. |
| | | Г | | | in installments. If you or Filing Fee in Installmen | | | and attach the Application for |
| | | Г | By l thai fee | aw, a judge may, b n 150% of the offici in installments). If | ut is not required to, wai | ive your fies to you you | fee, and may do ur family size and ut fill out the Appl | rou are filing for Chapter 7. so only if your income is less d you are unable to pay the lication to Have the Chapter 7 |
| 9. | Have you filed for | Б | Z No | | | | | |
| | bankruptcy within last 8 years? | the F | − T Yes | | | | | |
| | , | _ D | - District | | | When | | Case number |
| | | | | | | _ | MM / DD / YYYY | Case number |
| | | D | District | | | When | MM / DD / VVVV | Case number |
| | | D | istrict | | | | | |
| | | | • | | | _ | MM / DD / YYYY | Case number |
| 10. | Are any bankrupto | | Z No | | | | | |
| | cases pending or I filed by a spouse v | | Yes | | | | | |
| | not filing this case | 13 | ebtor | | | | Relationsh | ip to you |
| | you, or by a busine partner, or by an | | District | | | | | Case number, |
| | affiliate? | | | | | | MM / DD / YYYY | |
| | | D | ebtor | | | | Relationsh | ip to you |
| | | | • | | | | | Case number, |
| | | D | istrict . | | | _ whien | MM / DD / YYYY | if known |
| 11. | Do you rent your residence? | <u> </u> | ☑ No. ☐ Yes | . Has your landlo residence? | line 12. | . • | | d do you want to stay in your Against You (Form 101A) |
| | | | | _ | ith this bankruptcy petit | | olion oddyment / | igamot rou (i omi ro izi) |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 4 of 51

| Deb | otor 1 | Shela Rangoonwala | a | | | Case number (i | if known) | | |
|-----|--|---|-------------------------|------------|--|--|------------------------------------|------------------------|----------------------------------|
| P | art 3: | Report About Ar | ıy Bı | ısine | sses You Own as a | a Sole Proprietor | | | |
| 12. | - | a sole proprietor ull- or part-time ss? | | | Go to Part 4. Name and location of b | usiness | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | | Name of business, if any Number Street | | | | |
| | If you ha | ave more than one prietorship, use a e sheet and attach it etition. | | | Health Care Busin Single Asset Rea Stockbroker (as d | box to describe your business: ness (as defined in 11 U.S.C. § I Estate (as defined in 11 U.S.C. § 101(53A) er (as defined in 11 U.S.C. § 100 er (as defined in 11 U.S.C. § 100 er | 101(27A)) c. § 101(51B)) | ZIP Co | de |
| 13. | 3. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business | | can mos | set ap | opropriate deadlines. If you | the court must know whether you indicate that you are a small the state of operations, cash-flow state exist, follow the procedure in | ll business deb atement, and fe | otor, you ederal in | must attach your come tax return |
| | debtor | • | $\overline{\mathbf{A}}$ | No. | I am not filing under Cl | hapter 11. | | | |
| | | efinition of small s debtor, see | | No. | I am filing under Chapt the Bankruptcy Code. | ter 11, but I am NOT a small bu | siness debtor | accordin | g to the definition in |
| | 11 U.S. | C. § 101(51D). | | Yes. | I am filing under Chapt Bankruptcy Code. | ter 11 and I am a small busines | s debtor accor | ding to t | he definition in the |
| P | art 4: | Report If You Ov | vn o | r Hav | e Any Hazardous F | Property or Any Property | / That Need | is imm | ediate Attention |
| 14. | propert alleged | own or have any y that poses or is to pose a threat of nt and identifiable | | No Yes. | What is the hazard? | | | | |
| | safety? any pro | to public health or Or do you own perty that needs ate attention? | | | If immediate attention | is needed, why is it needed? | | | |
| | perisha livestoc | mple, do you own ble goods, or k that must be fed, or ng that needs urgent | | | Where is the property? | Number Street | | | |
| | | | | | | City | | State | ZIP Code |

| Deb | otor 1 Shela Ran | goonwala | | Ca | ase number (if kno | wn) | |
|---|--|---|--|---|---|--|--|
| P | art 5: Explain | Your Efforts to Re | eceive a Briefing About Credi | it Co | ounseling | | |
| 15. | Tell the court whether you have received briefing about credit counseling. The law requires that you receive a | counseling ager filed this bankru certificate of cou Attach a copy of | fing from an approved credit ncy within the 180 days before I ptcy petition, and I received a | Yo | I received a brie counseling ager filed this bankru certificate of con Attach a copy of the | fing from an approved credit ncy within the 180 days before I ptcy petition, and I received a | |
| | briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. | counseling ager filed this bankru a certificate of c Within 14 days at | fing from an approved credit ncy within the 180 days before I aptcy petition, but I do not have ompletion. Iter you file this bankruptcy petition, copy of the certificate and payment | ne 180 days before I counseling filed this ba a certificate his bankruptcy petition, Within 14 da | | fing from an approved credit ncy within the 180 days before I ptcy petition, but I do not have ompletion. fter you file this bankruptcy petition, copy of the certificate and payment | |
| you are not eligible to file. If you file anyway the court can dismiss your case you will lose whatever filing fee you paid, and you creditors can beg | If you cannot do so, you are not eligible to file. If you file anyway, the court can | services from ar unable to obtain days after I mad | ked for credit counseling n approved agency, but was those services during the 7 e my request, and exigent nerit a 30-day temporary quirement. | | ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement. | | |
| | you will lose whatever filing fee you paid, and your creditors can begin collection activities | requirement, atta efforts you made were unable to ob bankruptcy, and | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. | | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. | | |
| | | dissatisfied with y | e dismissed if the court is your reasons for not receiving a ou filed for bankruptcy. | dissatisfied with yo | | e dismissed if the court is your reasons for not receiving a ou filed for bankruptcy. | |
| | | still receive a brid You must file a co along with a copy | sfied with your reasons, you must fing within 30 days after you file. ertificate from the approved agency, of the payment plan you If you do not do so, your case d. | | If the court is satisfied with your reasons, you must lill receive a briefing within 30 days after you fill You must file a certificate from the approved ago along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. | | |
| | | for cause and is I | the 30-day deadline is granted only imited to a maximum of 15 days. d to receive a briefing about | | for cause and is I | the 30-day deadline is granted only imited to a maximum of 15 days. d to receive a briefing about | |
| | | | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | | | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | |
| | | ☐ Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. | | ☐ Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. | |
| | | Active duty. | I am currently on active military duty in a military combat zone. | | Active duty. | I am currently on active military duty in a military combat zone. | |
| | | | u are not required to receive a edit counseling, you must file a | | | are not required to receive a edit counseling, you must file a | |

motion for waiver of credit counseling with the court.

motion for waiver of credit counseling with the court.

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 6 of 51

| Debtor 1 Shela Rangoonwala | | Case number (if known) | | | | | | | |
|----------------------------|-----------------|--|-------------------------|---|-------------------------------|------------------|--|-------|--|
| P | art 6: | Answer These C | uest | ions 1 | or Reporting I | Purpos | ses | | |
| 16. | What k have? | ind of debts do you | 16a | | - | vidual pr b. | sumer debts? Consumer de imarily for a personal, family, | | re defined in 11 U.S.C. § 101(8) usehold purpose." |
| | | | 16b | | • | or invest ic. | iness debts? Business deb ment or through the operation | | debts that you incurred to obtain e business or investment. |
| | | | 16c | Stat | e the type of debts | you owe | e that are not consumer or bu | sines | s debts. |
| 17. | • | u filing under | | | | | | | |
| | Chapte | r 7? | | No. I am not filing under Chapter 7. Go to line 18. | | | | | |
| 4 | any ex | Do you estimate that after any exempt property is excluded and | | Yes. | • | | • | - | xempt property is excluded and to distribute to unsecured creditors? |
| | | administrative expenses are paid that funds will be | | | ☑ No | | | | |
| | availab | le for distribution ecured creditors? | | | Yes | | | | |
| 18. | | any creditors do | | 1-49 | | | 1,000-5,000 | | 25,001-50,000 |
| | you est | timate that you | | 50-99 100-1 | | | 5,001-10,000 10,001-25,000 | | 50,001-100,000 More than 100,000 |
| | | | | 200-9 | | Ь | 10,001 20,000 | Ц | more than recipes |
| 19. | | uch do you | $\overline{\checkmark}$ | \$0-\$5 | | | \$1,000,001-\$10 million | | \$500,000,001-\$1 billion |
| | be wor | te your assets to th? | | | 01-\$100,000 001-\$500,000 | | \$10,000,001-\$50 million \$50,000,001-\$100 million | R | \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion |
| | | | | | 001-\$1 million | | \$100,000,001-\$500 million | | More than \$50 billion |
| 20. | | uch do you | | \$0-\$5 | · | | \$1,000,001-\$10 million | | \$500,000,001-\$1 billion |
| | estima: be? | te your liabilities to | | | 01-\$100,000 001-\$500,000 | | \$10,000,001-\$50 million \$50,000,001-\$100 million | | \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion |
| | | | | | 001-\$1 million | 님 | \$100,000,001-\$500 million | H | More than \$50 billion |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 7 of 51

| Debtor 1 | Shela Rangoonwala | | Case n | umber (if known) |
|----------|-------------------|--|--------------------------|--|
| Part 7: | Sign Below | | | |
| For you | | I have examined this petition, and I and correct. | declare under penalty | of perjury that the information provided is true |
| | | • | · | may proceed, if eligible, under Chapter 7, 11, 12, ief available under each chapter, and I choose to |
| | | If no attorney represents me and I d fill out this document, I have obtained | | pay someone who is not an attorney to help me required by 11 U.S.C. § 342(b). |
| | | I request relief in accordance with th | e chapter of title 11, l | United States Code, specified in this petition. |
| | | S . | can result in fines up t | rty, or obtaining money or property by fraud in o \$250,000, or imprisonment for up to 20 years, |
| | | X /s/ Shela Rangoonwala | | x |
| | | Shela Rangoonwala, Debtor 1 | | Signature of Debtor 2 |
| | | Executed on <u>04/27/2017</u> MM / DD / YYYY | | Executed on MM / DD / YYYY |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 8 of 51

| Debtor 1 | Shela Rangoonwala | | Case number (if know | າ) |
|------------|---|--|---|--|
| represente | not represented by ey, you do not need | I, the attorney for the debtor(s) named in this eligibility to proceed under Chapter 7, 11, 12, relief available under each chapter for which the debtor(s) the notice required by 11 U.S.C. certify that I have no knowledge after an inquis incorrect. | or 13 of title 11, United Sta the person is eligible. I also § 342(b) and, in a case in | tes Code, and have explained the ocertify that I have delivered to which § 707(b)(4)(D) applies, |
| | | X /s/ Robert J. Adams & Associates Signature of Attorney for Debtor | Date | 04/27/2017 MM / DD / YYYY |
| | | Robert J. Adams & Associates Printed name Robert J Adams & Associates Firm Name 901 W Jackson Suite 202 Number Street | | |
| | | Chicago City | IL State | 60607 ZIP Code |
| | | Contact phone (312) 346-0100 | Email address | |
| | | 0013056 Bar number | State | _ |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 9 of 51

| Fill in this i | nformation to ide | ntify your case a | and this filing: | | |
|---|---|--|---|---|---------------------------------------|
| Debtor 1 | Shela | | Rangoonwala | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filin | ng) First Name | Middle Name | Last Name | | |
| United States I | Bankruptcy Court for th | e· NORTHERN DI | STRICT OF ILLINOIS | | |
| Case number | Darmaptoy Court for the | | | | |
| (if known) | | | | _ · · · · · · · · · · · · · · · · · · · | if this is an led filing |
| Official For | m 106A/B | | | | |
| Schedule / | A/B: Property | | | | 12/15 |
| the asset in the filing together, sheet to this for Part 1: | category where you both are equally responding. On the top of any Describe Each Res | think it fits best. Be onsible for supplyin additional pages, w sidence, Building | as complete and accurate a g correct information. If mo rrite your name and case nu | sset fits in more than one cars possible. If two married per space is needed, attach a mber (if known). Answer ever the You Own or Have and, or similar property? | eople are separate ry question. |
| ш : : | So to Part 2. Where is the property? | | | | |
| 1.1. 6122 N. Seeley Chicago, IL 60 | y, Apartment 2 C, 0659-4336 | What is the Check all th ☐ Single- | | Do not deduct secured clai amount of any secured cla Creditors Who Have Claim | ims on Schedule D: |
| cond | | Duplex | or multi-unit building minium or cooperative | Current value of the entire property? | Current value of the portion you own? |
| | | = | actured or mobile home | \$10,148.00 | \$10,148.00 |
| County | | ш | nent property are | Describe the nature of you interest (such as fee simple entireties, or a life estate) | ole, tenancy by the |
| | | Who has a | n interest in the property? | Fee simple | |
| | | _ | 1 only | Check if this is comm (see instructions) | nunity property |
| | | | mation you wish to add about | ut this item, such as local | |
| | | | f your entries from Part 1, in e that number here | | \$10,148.00 |
| Part 2: | Describe Your Veh | nicles | | | |
| | · · | • | - | re registered or not? Include secutory Contracts and Unexpi | • |
| 3. Cars, vans | s, trucks, tractors, spo | ort utility vehicles, m | otorcycles | | |
| □ No ∀ Yes | | | | | |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 10 of 51

| Deb | tor 1 Shela R | angoonwala | | Case number (if known) | |
|-----------------------|---|--|---|---------------------------------------|---|
| Other 201 Doc Pur was | e: lel: r: roximate mileage: er information: 2 Toyota Prius or Hatchback (a chase Price on s \$12,687 o.com indicates id1,361 Watercraft, aircraft | Plug-In Hybrid; 4 pprox. 64000 miles) October 10, 2016 its value is \$9,706 aft, motor homes, ATVs | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth Check if this is community property (see instructions) and other recreational vehicles, other valuations are supported by the support of the debtors and another see instructions. | ehicles, and accessories | ms on <i>Schedule D:</i> |
| 5. | _ | alue of the portion you o | wn for all of your entries from Part 2, in | cluding any | \$11,000.00 |
| | entries for pages | s you have attached for | Part 2. Write that number here | | \$11,000.00 |
| Pa | art 3: Descr | ibe Your Personal a | and Household Items | | |
| Doy | you own or have a | any legal or equitable in | terest in any of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6. | _ | s and furnishings appliances, furniture, line | ens, china, kitchenware | | |
| | Yes. Describ | e 5 room condo | | | \$500.00 |
| 7. | • | | video, stereo, and digital equipment; comp evices including cell phones, cameras, med | · · · · · · · · · · · · · · · · · · · | |
| | ✓ No ☐ Yes. Describ | e | | | |
| 8. | | ues and figurines; painting | gs, prints, or other artwork; books, pictures ollections; other collections, memorabilia, o | | |
| | ✓ No ☐ Yes. Describ | e | | | |
| 9. | Examples: Sports | | and other hobby equipment; bicycles, poctools; musical instruments | ol tables, golf clubs, skis; | |
| | ✓ No Yes. Describ | e | | | |
| 10. | | s, rifles, shotguns, ammu | nition, and related equipment | | |
| | ✓ No ☐ Yes. Describ | e | | | |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 11 of 51

| Deb | otor 1 Shela Rangoonwala | Case number (if known) | |
|-----|--|--|---|
| 11. | Clothes Examples: Everyday clothes, furs, I □ No | leather coats, designer wear, shoes, accessories | |
| | Yes. Describe Clothes | | \$350.00 |
| 12. | Jewelry Examples: Everyday jewelry, costum gold, silver | me jewelry, engagement rings, wedding rings, heirloom jewelry, watches, ger | ns, |
| | ☑ No ☐ Yes. Describe | | |
| 13. | Non-farm animals Examples: Dogs, cats, birds, horses | s | |
| | ☑ No ☐ Yes. Describe | | |
| 14. | Any other personal and househol did not list | d items you did not already list, including any health aids you | |
| | ✓ No Yes. Give specific information | | |
| 15. | | entries from Part 3, including any entries for pages you have nber here | \$850.00 |
| P | art 4: Describe Your Final | ncial Assets | |
| Do | you own or have any legal or equita | able interest in any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | Cash Examples: Money you have in your petition | wallet, in your home, in a safe deposit box, and on hand when you file your | |
| | □ No ☑ Yes | Cash: | \$150.00 |
| 17. | Deposits of money Examples: Checking, savings, or of | ther financial accounts; certificates of deposit; shares in credit unions, other similar institutions. If you have multiple accounts with the same | |
| | ☐ No ☑ Yes | Institution name: | |
| | 17.1. Checking account: | Checking account; Chase | \$175.00 |
| 18. | Bonds, mutual funds, or publicly | | |
| | Examples: Bond funds, investment ✓ No | accounts with brokerage firms, money market accounts | |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 12 of 51

| Deb | otor 1 Shela Rangoonwala | Case number (if known) | | | | | |
|-----|--|---|--|--|--|--|--|
| 19. | Non-publicly traded stock and interests in incorporated and uni an interest in an LLC, partnership, and joint venture | on-publicly traded stock and interests in incorporated and unincorporated businesses, including | | | | | |
| | ✓ No Yes. Give specific information about them | % of ownership: | | | | | |
| 20. | Government and corporate bonds and other negotiable and nor Negotiable instruments include personal checks, cashiers' checks, Non-negotiable instruments are those you cannot transfer to someo | promissory notes, and money orders. | | | | | |
| | ✓ No Yes. Give specific information about them | | | | | | |
| 21. | Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift say profit-sharing plans | vings accounts, or other pension or | | | | | |
| | No Yes. List each account separately. Type of account: Institution name: | | | | | | |
| 22. | Security deposits and prepayments Your share of all unused deposits you have made so that you may of Examples: Agreements with landlords, prepaid rent, public utilities of companies, or others | | | | | | |
| | ✓ No ☐ Yes Institution name or in | | | | | | |
| 23. | Annuities (A contract for a specific periodic payment of money to y ✓ No ✓ Yes | ou, either for life or for a number of years) | | | | | |
| 24. | Interests in an education IRA, in an account in a qualified ABLE 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). | program, or under a qualified state tuition program. | | | | | |
| | ✓ No☐ Yes Institution name and description. Sepa | rately file the records of any interests. 11 U.S.C. § 521(c) | | | | | |
| 25. | Trusts, equitable or future interests in property (other than anyt powers exercisable for your benefit | hing listed in line 1), and rights or | | | | | |
| | ✓ No✓ Yes. Give specific information about them | | | | | | |
| 26. | Patents, copyrights, trademarks, trade secrets, and other intelle Examples: Internet domain names, websites, proceeds from royaltic | • • • | | | | | |
| | ✓ No✓ Yes. Give specific information about them | | | | | | |
| 27. | Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative associ ✓ No | ation holdings, liquor licenses, professional licenses | | | | | |
| | Yes. Give specific information about them | | | | | | |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 13 of 51

| Deb | otor 1 | Shela Rangoonwala | <u>ı</u> | | Case number (if known) | |
|-----|---------------|---|--|--|----------------------------------|---|
| Mor | ney or pr | roperty owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax ref | unds owed to you | | | | |
| | abo you | s. Give specific informat out them, including wheth a already filed the returns | ner S | | Fed Sta | deral:te: |
| | and | d the tax years | | | Loc | al: |
| 29. | - | support les: Past due or lump su | m alimony, spousal sup | port, child support, mainten | nance, divorce settlement, pro | perty settlement |
| | | s. Give specific informat | ion | | Alimony: | |
| | | | | | Maintenance: | |
| | | | | | Support: | |
| | | | | | Divorce settlem | nent: |
| | | | | | Property settler | ment: |
| | Example No | compensation, Socia | bility insurance payments al Security benefits; unp | is, disability benefits, sick paraid loans you made to som | | |
| 31. | | ts in insurance policies | | ······································ | : Lamacumarla ar rantarla inc | |
| | ✓ No ☐ Yes | • | | | it, homeowner's, or renter's ins | surance Surrender or refund value: |
| 32. | If you a | rerest in property that is re the beneficiary of a liv to receive property beca | ring trust, expect proceed | ne who has died ds from a life insurance pol | licy, or are currently | |
| | ✓ No ☐ Yes | s. Give specific informat | ion | | | |
| 33. | | against third parties, was: Accidents, employm | • | e filed a lawsuit or made a claims, or rights to sue | a demand for payment | |
| | ✓ No ☐ Yes | s. Describe each claim | | | | |
| 34. | rights t | contingent and unliquid to set off claims | ated claims of every na | ature, including countercl | aims of the debtor and | |
| | ✓ No ☐ Yes | s. Describe each claim | | | | |
| 35. | Any fin | ancial assets you did n | ot already list | | | |
| | ✓ No ☐ Yes | s. Give specific informati | ion | | | |
| 36. | | • | | I, including any entries for | | \$325.00 |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 14 of 51

| Deb | tor 1 | Shela Rangoonwala | Case number (if kno | wn) |
|-----|--------------|---|---------------------------|--|
| Pa | art 5: | Describe Any Business-Related Property You Own or H | ave an Interest In. | List any real estate in Part 1. |
| 37. | Do you | own or have any legal or equitable interest in any business-related | property? | |
| | _ | . Go to Part 6. s. Go to line 38. | | |
| | | | | Current value of the portion you own? Do not deduct secured |
| 38. | Accou | nts receivable or commissions you already earned | | claims or exemptions. |
| | ✓ No | s. Describe | | |
| 39. | | equipment, furnishings, and supplies les: Business-related computers, software, modems, printers, copiers, fa desks, chairs, electronic devices | x machines, rugs, teleph | nones, |
| | ✓ No | s. Describe | | |
| 40. | Machi | nery, fixtures, equipment, supplies you use in business, and tools of | your trade | |
| | ✓ No | s. Describe | | |
| 41. | Invente | pry | | |
| | ✓ No | s. Describe | | |
| 42. | Interes | ts in partnerships or joint ventures | | |
| | ✓ No | s. Describe Name of entity: | % of ov | wnership: |
| 43. | Custor | ner lists, mailing lists, or other compilations | | |
| | ✓ No □ Ye | s. Do your lists include personally identifiable information (as define No Yes. Describe | ed in 11 U.S.C. § 101(41 | A))? |
| 44. | Any bu | siness-related property you did not already list | | |
| | ✓ No | s. Give specific information. | | |
| 45. | | e dollar value of all of your entries from Part 5, including any entries ed for Part 5. Write that number here | | → \$0.00 |
| Pa | art 6: | Describe Any Farm- and Commercial Fishing-Related P If you own or have an interest in farmland, list it in Part 1. | roperty You Own o | or Have an Interest In. |
| 46. | Do you | own or have any legal or equitable interest in any farm- or commerc | cial fishing-related prop | perty? |
| | | . Go to Part 7. s. Go to line 47. | | |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 15 of 51

| Deb | tor 1 | Shela Rangoonwala | Case number (if known) | |
|-----|---------------|---|---------------------------------------|---|
| | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 47. | Farm a | | | |
| | | es: Livestock, poultry, farm-raised fish | | |
| | ✓ No ☐ Yes | | | |
| | _ | | | |
| 48. | Crops- | either growing or harvested | | |
| | ☑ No | | | |
| | | Give specific | | |
| | | rmation | | |
| 49. | Farm a | nd fishing equipment, implements, machinery, fixtures, and tools of tra | ade | |
| | ☑ No | | | |
| | ☐ Yes | | | |
| 50. | Farm a | nd fishing supplies, chemicals, and feed | | |
| | ☑ No | | | |
| | Yes | i | | |
| 51. | Any far | m- and commercial fishing-related property you did not already list | | |
| | ☑ No | | | |
| | | Give specific | | |
| | | rmation | | |
| 52. | | e dollar value of all of your entries from Part 6, including any entries for d for Part 6. Write that number here | | \$0.00 |
| | attachic | d for Fart 6. Write that number here | | |
| Pa | art 7: | Describe All Property You Own or Have an Interest in Tha | at You Did Not List Above | |
| | | have the constant of soul in house it is a few house | | |
| 53. | | have other property of any kind you did not already list? es: Season tickets, country club membership | | |
| | | oor occording occurry | | |
| | ✓ No | O'con an artifactor and a | | |
| | ☐ Yes | s. Give specific information. | | |
| 54. | Add the | e dollar value of all of your entries from Part 7. Write that number here | • • • • • • • • • • • • • • • • • • • | \$0.00 |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 16 of 51

| Debtor 1 | Shela Rangoonwala | Case nu | umber (if known) | | |
|------------|--|---------------|------------------------------|---|-------------|
| Part 8: | List the Totals of Each Part of this Form | | | | |
| 55. Part 1 | l: Total real estate, line 2 | | | | \$10,148.00 |
| 56. Part 2 | 2: Total vehicles, line 5 | \$11,000.00 | | | |
| 57. Part 3 | 3: Total personal and household items, line 15 | \$850.00 | | | |
| 58. Part 4 | I: Total financial assets, line 36 | \$325.00 | | | |
| 59. Part 5 | 5: Total business-related property, line 45 | \$0.00 | | | |
| 60. Part 6 | 6: Total farm- and fishing-related property, line 52 | \$0.00 | | | |
| 61. Part 7 | 7: Total other property not listed, line 54 | <u>\$0.00</u> | | | |
| 62. Total | personal property. Add lines 56 through 61 | \$12,175.00 | Copy personal property total | + | \$12,175.00 |
| 63. Total | of all property on Schedule A/B. Add line 55 + line 62 | | | | \$22,323.00 |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 17 of 51

| Fill in this inf | ormation to id | entify your | case: | | | | | |
|---|---|---|--|--------------------------------------|--|------------------------------|--|-----------|
| Debtor 1 | Shela | | Rangoon | wala | a | | | |
| | First Name | Middle Name | | | | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | e Last Name | | | | | |
| | | the: NORTHE | RN DISTRICT OF I | LLIN | iois | | Chapte if this is an | |
| Case number (if known) | | | | | | | Check if this is an amended filing | |
| Official Form | 106C | | | | | | | |
| | | rty You Cl | aim as Exemp | ot | | | | 04/16 |
| Using the property space is needed, fi write your name an For each item of p is to state a speciexempted up to the receive certain be | you listed on Sche Il out and attach to d case number (if property you clain fic dollar amount the amount of any a nefits, and tax-ex | edule A/B: Prop this page as m known). n as exempt, yo as exempt. Al applicable state empt retireme | nerty (Official Form 106 nany copies of Part 2 nany be unlike to the Part 2 nany copies of the Part 2 nany copies o | SA/B) Add amou clair cemp imite | as your sourd ditional Page unt of the exe n the full fair tionssuch a d in dollar an | mption y market v s those in | esponsible for supplying correct info e property that you claim as exempt ssary. On the top of any additional you claim. One way of doing so value of the property being for health aids, rights to lowever, if you claim an | . If more |
| | | | w that limits the exe our exemption would | - | - | | ar amount and the value of the e statutory amount. | |
| Part 1: Ide | ntify the Prope | erty You Cla | aim as Exempt | | | | | |
| 1. Which set of | exemptions are y | ou claiming? | Check one only, e | even | if your spouse | e is filina | with you | |
| | | • | kruptcy exemptions. | | | ŭ | wiiii you. | |
| <u></u> | claiming federal ex | | | | 0.0.3 0==(0) | (0) | | |
| 2. For any prop | erty vou list on S | chedule A/R th | nat you claim as exen | nnt f | ill in the infor | mation I | helow | |
| , , , | | | • | • | | mationi | | |
| Schedule A/B that | | | Current value of the portion you own | | ount of the mption you c | laim | Specific laws that allow exemp | tion |
| | | | Copy the value from Schedule A/B | | eck only one b h exemption | ox for | | |
| Brief description: | | | \$10,148.00 | $\overline{\mathbf{V}}$ | \$0.00 |) | 735 ILCS 5/12-901 | |
| cond Line from Schedule | e A/B: 1.1 | | | | 100% of fair value, up to a applicable st limit | any | | |
| (Subject to ad | justment on 4/01/1 | 9 and every 3 y | more than \$160,375? years after that for cas | es fil | | | | |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 18 of 51

| Debtor 1 | Shela Rangoonwala | Case number (if known) | | | | |
|--|--|--------------------------------------|----------|--|------------------------------------|--|
| Part 2: | Additional Page | | | | | |
| | ption of the property and line on //B that lists this property | Current value of the portion you own | | ount of the mption you claim | Specific laws that allow exemption | |
| | | Copy the value from Schedule A/B | | eck only one box for h exemption | | |
| 64000 mile 2012 Toyo Hatchback Purchase \$12,687 kbb.com ir \$11,361 (1st exemp | ta Prius Plug-In Hybrid (approx. | \$11,000.00 | | \$2,400.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(c) | |
| 64000 mile 2012 Toyo Hatchback Purchase \$12,687 kbb.com ir \$11,361 (2nd exem | ta Prius Plug-In Hybrid (approx. | \$11,000.00 | | \$2,195.12 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | |
| Brief descrip | | \$500.00 | V | \$500.00 100% of fair market | 735 ILCS 5/12-1001(b) | |
| Line from So | chedule A/B: 6 | | | value, up to any applicable statutory limit | | |
| Brief descrip | otion: | \$350.00 | | \$350.00 100% of fair market | 735 ILCS 5/12-1001(a), (e) | |
| Line from So | chedule A/B:11 | | | value, up to any applicable statutory limit | | |
| Brief descrip | otion: | \$150.00 | I | \$150.00 100% of fair market | 735 ILCS 5/12-1001(b) | |
| Line from So | chedule A/B: 16 | | | value, up to any applicable statutory limit | | |
| Brief descrip | | \$175.00 | | \$175.00 | 735 ILCS 5/12-1001(b) | |
| _ | account; Chase Chedule A/B:17.1 | | | 100% of fair market value, up to any applicable statutory limit | | |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 19 of 51

| Fill in this information to | : .l (:f | | | | | |
|---|---------------------------|--------------------------|--------------|---------------------------------|-----------------------------------|--|
| Debtor 1 Shela First Name | Middle Name | Rangoonwala Last Name | | | | |
| Debtor 2 (Spouse, if filing) First Name | Middle Name | Last Name | | | | |
| United States Bankruptcy Court f | or the: NORTHERN D | ISTRICT OF ILLINOI | <u>s</u> | | | |
| Case number (if known) | | | | Check if this is amended filing | | |
| Official Form 106D | | | | | | |
| Schedule D: Creditors | Who Have Cla | ims Secured by | / Property | | 12/15 | |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims | | | | | | |
| creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the much as possible, list the claims in alphabetical order according to the much as possible, list the claims in alphabetical order according to the much as possible, list the claims in alphabetical order according to the much as possible, list the claims in alphabetical order according to the much as possible, list the claims in alphabetical order according to the much as possible, list the claims in alphabetical order according to the much as possible, list the claims in alphabetical order according to the much as possible, list the claims in alphabetical order according to the much as possible, list the claims in alphabetical order according to the much as possible, list the claims in alphabetical order according to the much as possible, list the claims in alphabetical order according to the much as possible according to the much as possible according to the much according to | | | | | Column C Unsecured portion If any | |
| 2.1 | Describe the secures the | property that | \$101,448.00 | \$101,448.00 | | |
| Chase Home Finance Creditor's name PO Box 509011 Number Street | mortgage | ciaim: | <u> </u> | <u> </u> | | |
| As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | | | | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$101,448.00

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 20 of 51

| Debtor 1 Shela Rangoonwala | | | Case number (if known) | | | |
|-------------------------------------|---|---|--|---|-----------------------------------|--|
| Part 1: | Additional Page After listing any entries on sequentially from the previous | | Column A Amount of claim Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any | |
| 2.2 Long Kog | on Inc | Describe the property that secures the claim: | \$0.00 | \$0.00 | | |
| | | condo lien | | | | |
| Debtor Debtor Debtor At least Check | | As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, many Judgment lien from a lawsuit Other (including a right to offset) | mortgage or secured | car loan) | | |
| | vas incurred | Last 4 digits of account number | | | | |
| Creditor's nan | | Describe the property that secures the claim: 2012 Toyota Prius Hybrid | \$6,404.88 | \$11,000.00 | | |
| Debtor Debtor Debtor At least Check | State ZIP Code the debt? Check one. 1 only | As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, many Judgment lien from a lawsuit Other (including a right to offset) Car Loan | mortgage or secured | car loan) | | |
| Date debt v | was incurred September 20 | Last 4 digits of account number | | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$6,404.88

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$107,852.88

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 21 of 51

| Fill in this info | ormation to iden | | | |
|---------------------|------------------------|-------------|-------------|---------------------|
| Debtor 1 | Shela | | Rangoonwala | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bar | nkruptcy Court for the | | | |
| Case number | | | | Check if this is an |
| (if known) | | | | amended filing |

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

| Part 1: | List All of | Your PRIORITY | Unsecured | Claims |
|-----------|-------------|------------------|-------------|---------|
| I all II. | LISE All OI | I Oul I INIONI I | Uliaecul eu | Ciaiiis |

| 1. | Do any creditors | have priority | unsecured of | claims against you? |
|----|------------------|---------------|--------------|---------------------|
|----|------------------|---------------|--------------|---------------------|

✓ No. Go to Part 2.

✓ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.

Total claim Priority Nonpriority amount amount

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 22 of 51

| If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2. Total claim | Debtor 1 | Shela Rangoonwala | Case number (if known) | |
|---|-------------------|---|---|-------------|
| No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes Yes | Part 2: | List All of Your NONPRIORIT | TY Unsecured Claims | |
| 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, lill out the Continuation Page of Part 2. At the continuation of Page of Part 2. | 3. Do ar | ny creditors have nonpriority unsecured | d claims against you? | |
| If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim its. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2. Total claim | □ ¹ | No. You have nothing to report in this part | | |
| Bank of America Last 4 digits of account number | If a cr type c | editor has more than one nonpriority unse of claim it is. Do not list claims already inc | cured claim, list the creditor separately for each claim. For each claim listed, cluded in Part 1. If more than one creditor holds a particular claim, list the other | |
| Bank of America Cast 4 digits of account number PO Box 1598 | | | | Total claim |
| Nonpriority Creditor's Name PO Box 1598 Number Street Street Contingent Unliquidated Disputed | 4.1 | | | \$894.42 |
| Number Street Contingent Unliquidated Unliquidated Disputed | | | Last 4 digits of account number | |
| Norfolk VA 23501 Contingent Disputed Disput | | | When was the debt incurred? | |
| Unliquidated Disputed | K . | | As of the date you file, the claim is: Check all that apply. | |
| Disputed Disputed | | | | |
| Norpority Creditor's Name HRS USA Number Street P.O.Box 17298 Baltimore MD 21297-1298 Baltimore MD 21297-1298 Baltimore Check if this claim is for a community debt be both or 1 only Debtor 1 only Debtor 1 only Deptor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 5 and another Check if this claim 2 is for a community debt be the claim subject to offset? Best Buy Nonpoirity Creditor's Name HRS USA Number Contingent Unliquidated Disputed Baltimore MD 21297-1298 Cty Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 one Check if this claim is for a community debt ls the claim subject to offset? None Noopority Creditor's Name Hrs Ush Aleast one of the debtors and another Check if this claim is for a community debt ls the claim subject to offset? Noopority Creditor's Name Hrs Ush Aleast one of the debtors and another Check if this claim is for a community debt ls the claim subject to offset? Noopority Creditor's Name Hrs Ush Aleast one of the debtors and another Check if this claim is for a community debt ls the claim subject to offset? | | | □ ' | |
| Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Nonpriority Creditor's Name HRS USA Number Street P.O.Box 17298 □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Check if this claim is for a community debt □ Debtor 1 only □ Check if this claim is for a community debt □ Debtor 1 only □ Check if this claim is for a community debt □ Debtor 1 only □ Check if this claim is for a community debt □ Debtor 1 only □ Check if this claim is for a community debt □ Debtor 1 only □ Check if this claim is for a community debt □ Debtor 1 only □ Check if this claim is for a community debt □ | Norfolk | VA 23501 | Disputed | |
| Debtor 1 only | • | | Type of NONPRIORITY unsecured claim: | |
| Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes 4.2 Best Buy Nonpriority Creditor's Name HRS USA Number Steet P.O.Box 17298 Clay State ZIP Code Who incurred the debt? Check one. Debtor 2 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Type of NoNPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 3 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No No Contingent Unliquidated Disputed Type of NoNPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No | | | Student loans | |
| □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ No □ Yes □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ No □ No □ Yes □ No | | , | | |
| At least one of the debtors and another Check if this claim is for a community debt | | | | |
| Check if this claim is for a community debt Is the claim subject to offset? No Yes 4.2 State Vip Code Who incurred the debt? Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Nonpriority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Credit Card \$1,867.05 \$1,867.05 \$1,867.05 \$1,867.05 | ш | • | 트 등 사람이 되었다. | |
| Is the claim subject to offset? No | ☐ Check | if this claim is for a community debt | | |
| State Zip Code | _ | • | orean dard | |
| ## State | | in subject to enset. | | |
| Best Buy Nonpriority Creditor's Name HRS USA Number Street P.O.Box 17298 Baltimore City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Nonopriority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Credit Card | <u>ت</u> ب | | | |
| Best Buy Nonpriority Creditor's Name HRS USA Number Street P.O.Box 17298 Baltimore City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Nonopriority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Credit Card | | | | |
| Nonpriority Creditor's Name HRS USA Number Street P.O.Box 17298 Baltimore MD 21297-1298 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card | 4.2 | | | \$1,867.05 |
| Number Street P.O.Box 17298 Baltimore MD 21297-1298 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card | Best Buy | • | Last 4 digits of account number | |
| Number Street P.O.Box 17298 Contingent Unliquidated Disputed | | | When was the debt incurred? | |
| P.O.Box 17298 Baltimore City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card | | | As of the date you file, the claim is: Check all that apply. | |
| Baltimore Disputed | P.O.Box | | | |
| Baltimore MD 21297-1298 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No | | | | |
| City State ZIP Code Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Credit Card | Raltimore | MD 21207-1208 | Disputed | |
| Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No | | | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card | Who incur | red the debt? Check one. | • • | |
| □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debtor 1 and Debtor 2 only □ Debtor 2 only □ Debtor 3 only □ Debtor 4 as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card | | • | | |
| At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No | _ | • | | |
| ☐ Check if this claim is for a community debt Credit Card Is the claim subject to offset? No | | | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offset? ✓ No | ш | | | |
| ☑ No | — | | Credit Card | |
| | | m subject to offset? | | |
| | ✓ No ☐ Yes | | | |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 23 of 51

| Debtor 1 Shela Rangoonwala | Case number (if known) | |
|--|---|-------------|
| Part 2: Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing any entries on this page, number the previous page. | em sequentially from the | Total claim |
| 4.3 | | \$1,233.47 |
| Capital One | Last 4 digits of account number | |
| Nonpriority Creditor's Name | When was the debt incurred? | |
| 15000 Capital One Number Street | As of the date you file, the claim is: Check all that apply. | |
| | _ Contingent | |
| | Unliquidated | |
| Richmond VA 23238 | ─ | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | Student loans | |
| Debtor 1 only Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 only | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | Other. Specify | |
| Check if this claim is for a community debt | Credit Card | |
| Is the claim subject to offset? | | |
| ✓ No Yes | | |
| 4.4 | | \$4,847.21 |
| Chase Nonpriority Creditor's Name | Last 4 digits of account number | |
| Bank One Card Service | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| 800 Brooksedge Blvd | ☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent | |
| | ☐ Unliquidated ☐ Disputed | |
| Westerville OH 43081 | ' _ | |
| City State ZIP Code Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only | that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | Other. Specify | |
| Check if this claim is for a community debt | Credit Card | |
| Is the claim subject to offset? No | | |
| Yes | | |
| 4.5 | | ***** |
| | Last A Bulla of account wombon | \$2,018.01 |
| Chase Nonpriority Creditor's Name | Last 4 digits of account number | |
| Bank One Card Service | When was the debt incurred? | |
| Number Street 800 Brooksedge Blvd | As of the date you file, the claim is: Check all that apply. | |
| 200 2.000.000490 2.114 | ☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent | |
| | — Disputed | |
| Westerville OH 43081 City State ZIP Code | Type of NONDRIORITY uncessured eleims | |
| Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only | that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| - | Other. Specify | |
| Check if this claim is for a community debt | Credit Card | |
| Is the claim subject to offset? | | |
| ✓ NO ☐ Yes | | |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 24 of 51

| Debtor 1 Shela Rangoonwala | Case number (if known) | |
|---|---|-------------|
| Part 2: Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing any entries on this page, number the previous page. | m sequentially from the | Total claim |
| 4.6 | | \$2,502.01 |
| First Bank | Last 4 digits of account number | |
| Nonpriority Creditor's Name | When was the debt incurred? | |
| PO Box 790269 Number Street | As of the date you file, the claim is: Check all that apply. | |
| | _ ☐ Contingent | |
| | Unliquidated | |
| Saint Louis MO 63179 | Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | Student loans | |
| Debtor 1 only | ☐ Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only | that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Check if this claim is for a community debt | ✓ Other. Specify | |
| | Credit Card | |
| Is the claim subject to offset? ✓ No | | |
| ☑ No □ Yes | | |
| | | |
| 4.7 | | \$10,196.00 |
| First Midwest Bank | Last 4 digits of account number | |
| Nonpriority Creditor's Name | When was the debt incurred? | |
| P.O.Box 9003 Number Street | As of the date you file, the claim is: Check all that apply. | |
| | _ | |
| | Unliquidated | |
| Gurnee IL 60031 | Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | Student loans | |
| Debtor 1 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Check if this claim is for a community debt | | |
| Is the claim subject to offset? | reisolidi lodii | |
| No No | | |
| ☐ Yes | | |
| $\overline{\Box}$ | | |
| 4.8 | | \$418.98 |
| Home Depot Credit Services | Last 4 digits of account number | |
| Nonpriority Creditor's Name Processing Center | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| PO Box 80084 | _ Contingent | |
| | ☐ Unliquidated ☐ Disputed | |
| Des Moines IA 50364 | Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | ☐ Student loans | |
| Debtor 1 only Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Check if this claim is for a community debt | | |
| Is the claim subject to offset? | | |
| No No | | |
| Yes | | |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 25 of 51

| Debtor 1 Shela Rangoonwala | Case number (if known) | |
|--|---|-------------|
| Part 2: Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing any entries on this page, number the previous page. | em sequentially from the | Total claim |
| 4.9 | | \$991.10 |
| Kohls Department Store | Last 4 digits of account number | |
| Nonpriority Creditor's Name N56W17000 Ridgewood | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | |
| | ☐ Disputed | |
| Menomonee Falls WI 53051 City State ZIP Code | — Toward MONDRIORITY was a sound delain. | |
| Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: Student loans | |
| Debtor 1 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| Check if this claim is for a community debt | Other Specify Other | |
| Is the claim subject to offset? | | |
| ☑ No ☐ Yes | | |
| 4.10 | | \$327.72 |
| Sears Premier Card Nonpriority Creditor's Name | Last 4 digits of account number | |
| P.O Box 183081 | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | ☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent | |
| Calumbua OU 42240 | Disputed | |
| Columbus OH 43218 City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | Student loans | |
| Debtor 1 only Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 only | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | Other. Specify | |
| ☐ Check if this claim is for a community debt | Credit Card | |
| Is the claim subject to offset? | | |
| ✓ No ☐ Yes | | |
| | | |
| 4.11 | | \$1,722.13 |
| Target | Last 4 digits of account number | |
| Nonpriority Creditor's Name PO Box 9475 | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | |
| Minnesonally 2000 | Disputed | |
| Minneapolis MN 55440 City State ZIP Code | | |
| Who incurred the debt? Check one. | Student loans | |
| Debtor 1 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| Check if this claim is for a community debt | ✓ Other. Specify Credit Card | |
| Is the claim subject to offset? | | |
| ☑ No ☐ Yes | | |
| 1 1 | | |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 26 of 51

| Debtor 1 Shela Rangoonwala | Case number (if known) | |
|--|---|------------------------|
| Part 2: Your NONPRIORITY Unsecu | ured Claims Continuation Page | |
| After listing any entries on this page, number the previous page. | em sequentially from the | Total claim \$6,034.83 |
| Walmart | Last 4 digits of account number | |
| Nonpriority Creditor's Name PO Box 530929 | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | |
| Atlanta GA 30353-0929 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card | |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 27 of 51

| Debtor 1 | Shela Rangoonwala | Case number (if known) |
|----------|--|---|
| Part 4: | Add the Amounts for Each Type of Unsecured Claim | |
| 6 | | to a detect of a consistence of the consistence of |

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | | | Total claim |
|--------------------------|-----|---|-------------------|-------------|
| Total claims from Part 1 | 6a. | Domestic support obligations | 6a. | \$0.00 |
| | 6b. | Taxes and certain other debts you owe the government | 6b. | \$0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | ^{6d.} + | \$0.00 |
| | 6e. | Total. Add lines 6a through 6d. | 6d. | \$0.00 |
| | | | | Total claim |
| Total claims from Part 2 | 6f. | Student loans | 6f | \$0.00 |
| | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | ^{6i.} +. | \$33,052.93 |
| | 6j. | Total. Add lines 6f through 6i. | 6j. | \$33,052.93 |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 28 of 51

| Fill in this in | nformation to | identify your case | : | | | |
|--------------------|---------------------|-------------------------|------------------|---|---------------------------------|------|
| Debtor 1 | Shela | | Rangoonwala | a | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing | g) First Name | Middle Name | Last Name | | | |
| United States B | Bankruptcy Court fo | or the: NORTHERN D | ISTRICT OF ILLIN | iois | | |
| Case number | | | | | _ | |
| (if known) | | | | | Check if this is amended filing | an |
| Official Forr | m 106G | | | | | |
| | | v Contracts on | d Upovpirod | Lagge | | 12 |
| Scriedule (| 3. Executor | y Contracts an | u onexpireu | Leases | | 14 |
| • | | contracts or unexpired | | chedules. You have nothir | ng else to report on this f | form |
| ш | | | • | s are listed on Schedule A | • | |
| is for (for e | • | icle lease, cell phone) | • | tract or lease. Then states for this form in the instru | | |
| Person (| or company with | whom you have the co | ontract or lease | State what the contr | ract or lease is for | |
| 2.1 Ong Ko | gen, Inc. | | | _ Condo Associatoi | n | |
| Name 7249 N | . Western Ave | | | Contract to be AS | SUMED | |
| Number | Street | | | _ | | |
| | | | | <u> </u> | | |
| Chicago | ^ | IL | 60645 | | | |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 29 of 51

| | | | | | 1 | | |
|------------|--|--|--|---|--|---------------------------------------|--------|
| F | II in this info | ormation to iden | tify your case: | | | | |
| De | ebtor 1 | Shela | | Rangoonwala | | | |
| | | First Name | Middle Name | Last Name | | | |
| | ebtor 2 | = | | | | | |
| (S | pouse, if filing) | First Name | Middle Name | Last Name | | | |
| Uı | nited States Bar | kruptcy Court for the | : NORTHERN DIS | TRICT OF ILLINOIS | | | |
| Ca | ase number | | | | _ | Check if this is an | |
| (if | known) | | | | L | amended filing | |
| | | | | | | - | |
| Ωf | ficial Form | 106H | | | | | |
| | | | | | | | 40/ |
| 3 0 | neaule n: | Your Codebt | ors | | | | 12/1 |
| two nee | married peopl ded, copy the <i>i</i> e. On the top o | e are filing together Additional Page, fill of any Additional Pa | , both are equally re it out, and number t ges, write your nam | ny debts you may have. Be sponsible for supplying co he entries in the boxes on the and case number (if know case, do not list either spous | rrect information. If the left. Attach the A vn). Answer every q | more space is additional Page to this | |
| | Yes | | | | | | |
| 2. | | | | y property state or territory ew Mexico, Puerto Rico, Tex | | | |
| | ✓ No. Go to | o line 3. | | | | | |
| | ш | your spouse, former | spouse, or legal equi | valent live with you at the tim | ie? | | |
| | □ No □ Yes | | | | | | |
| 3. | In Column 1, I person shows creditor on Se | n in line 2 again as a chedule D (Official F | codebtor only if that | e your spouse as a codebto at person is a guarantor or le E/F (Official Form 106E/F column 2. | cosigner. Make sure | e you have listed the | |
| | Column 1: | Your codebtor | | | Column 2: The cred | itor to whom you owe th | e debt |

Check all schedules that apply:

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 30 of 51

| G | ill in this inform | ation to iden | tify your case: | | | | | | | |
|--------------------------|--|--|---|--|------------------|------------------------------|----------------|--|--|--|
| | Debtor 1 | Shela | | Rangoor | nwala | 1 | | | | |
| | | First Name | Middle Name | Last Name | | | Che | eck if this is: | | |
| | Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | | An amended filing | | |
| | | | | | LINO | ie. | $ \Box$ | A supplement showing postpetition | | |
| | United States Bankru Case number | iptcy Court for th | e: NORTHERN | DISTRICT OF IL | LINU | 13 | | chapter 13 income as of the following date: | | |
| | (if known) | | | | = | | | MM / DD / YYYY | | |
| Of | ficial Form 10 | 6I | | | | | | | | |
| Sc | chedule I: You | ır Income | | | | | | 12/15 | | |
| res inc abo you | ponsible for supply lude information about your spouse. If i ur name and case nu | ing correct info out your spouse more space is n | mation. If you are If you are separ eeded, attach a se Answer every o | e married and not rated and your spo eparate sheet to th | filing ouse i | jointly, and s not filing | your with y | I Debtor 2), both are equally spouse is living with you, ou, do not include information any additional pages, write | | |
| 1. | Fill in your employ | ment | | | | | | | | |
| | information. If you have more th | an one | | Debtor 1 | | | | Debtor 2 or non-filing spouse | | |
| | job, attach a separa | ate page Em | oloyment status | | | | | Employed | | |
| | with information about additional employers. | | | ■ Not employed | | | | ■ Not employed | | |
| | | Occ | upation | Disabled | | | | | | |
| | Include part-time, s or self-employed wo | | oloyer's name | | | | | _ | | |
| | Occupation may inc | | oloyer's address | | | | | _ | | |
| | student or homema applies. | ker, if it | | Number Street | | | | Number Street | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | City | | State Zip C | ode | City State Zip Code | | |
| | | Hov | v long employed t | here? | | | | | | |
| | | | | | | | | | | |
| | | | Monthly Incom | | | | | | | |
| | timate monthly incon n-filing spouse unless | | | n. If you have noth | ing to | report for a | ny line | , write \$0 in the space. Include your | | |
| If y | ٠. | spouse have mo | e than one employ | er, combine the info | ormati | on for all em | nploye | rs for that person on the lines below. If | | |
| , | , , | · | | | | For Debtor | · 1 | For Debtor 2 or non-filing spouse | | |
| 2. | List monthly gross payroll deductions). would be. | | | | 2. | \$ | 0.00 | | | |
| 3. | Estimate and list r | nonthly overtim | e pay. | | 3. 4 | - \$ | 0.00 | | | |
| 4. | Calculate gross in | come. Add line | 2 + line 3. | | 4. | \$ | 0.00 | | | |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 31 of 51

| Deb | tor 1 | Shela Rangoonwala | | Case num | nber (i | if known |) | | |
|-----|--------------|--|--------------|------------------------|---------|-----------|---------------|----------|-------------------------|
| | | | | For Debtor 1 | | Debtor | | <u>.</u> | |
| | Сор | by line 4 here | 4. | \$0.00 | | | | _ | |
| 5. | List | all payroll deductions: | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$0.00 | _ | | | | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$0.00 | _ | | | | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$0.00 | _ | | | | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$0.00 | _ | | | | |
| | 5e. | Insurance | 5e. | \$0.00 | _ | | | | |
| | 5f. | Domestic support obligations | 5f. | \$0.00 | _ | | | | |
| | 5g. | Union dues | 5g. | \$0.00 | _ | | | | |
| | 5h. | Other deductions. Specify: | 5h.+ | \$0.00 | _ | | | | |
| 6. | | I the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5h. | 6. | \$0.00 | _ | | | | |
| 7. | Cald | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$0.00 | _ | | | | |
| 8. | List | all other income regularly received: | | | | | | | |
| | 8a. | Net income from rental property and from operating a business, profession, or farm | 8a. | \$0.00 | _ | | | | |
| | | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | | | | | | | |
| | 8b. | Interest and dividends | 8b. | \$0.00 | | | | | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive | 8c. | \$1,132.00 | _ | | | | |
| | | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | | | | | | | |
| | 8d. | Unemployment compensation | 8d. | \$0.00 | | | | | |
| | | Social Security | 8e. | \$773.00 | _ | | | | |
| | 8f. | Other government assistance that you regularly receive | | | _ | | | | |
| | | Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | | | | | | | |
| | | Specify: Link card | 8f. | \$228.00 | _ | | | | |
| | 8g. | Pension or retirement income | 8g. | \$0.00 | | | | | |
| | 8h. | Other monthly income. Specify: | 8h. . | + \$0.00 | _ | | | | |
| _ | | | - | | _ | | - | | |
| 9. | Add | d all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. | 9. | \$2,133.00 | L | | |) 1 F | |
| 10. | | culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$2,133.00 | +_ | | | = | \$2,133.00 |
| 11. | | te all other regular contributions to the expenses that you list in S | | | | | | | |
| | | ude contributions from an unmarried partner, members of your househnds or relatives. | nold, y | our dependents, you | r roon | nmates, | and oth | ner | |
| | Do r | not include any amounts already included in lines 2-10 or amounts tha | ıt are r | not available to pay e | xpens | ses liste | d in Sc | hedı | ule J. |
| | Spe | cify: | | | | | 11. | + | \$0.00 |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. The me. Write that amount on the Summary of Your Assets and Liabilities | | | | | 12. | | \$2,133.00 |
| | | applies. | , and | os.am catotica III | Jimal | , | | | Combined nonthly income |
| 13. | Doy | you expect an increase or decrease within the year after you file t | his fo | rm? | | | | | |
| | \checkmark | No. None. | | | | | | | |
| | | Yes. Explain: | | | | | | | |
| | | | | | | | | | |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 32 of 51

| F | ill in this inforr | nation to ide | entify | your case: | | | Cho | ck if this | io | | |
|------------|--|--|----------------|--|-----------------|---------------------|---------|------------|-----------------|-------------------|-------|
| | Debtor 1 | Shela | | | Rangooi | nwala | | | ended filing | | |
| | | First Name | | Middle Name | Last Name | THU GIA | ╽片 | | lement showing | postpetition | |
| | Debtor 2 (Spouse, if filing) | First Name | | Middle Name | Last Name | | | chapter | 13 expenses a | as of the | |
| | | | | | | | | | J | | |
| | | ruptcy Court fo | r the: | NORTHERN DISTR | RICT OF IL | LINOIS | | MM / D | D / YYYY | | |
| | Case number (if known) | | | | | _ | | | | | |
| <u>Of</u> | ficial Form 10 | 06J | | | | | | | | | |
| Sc | hedule J: Yo | our Exper | ses | | | | | | | | 12/15 |
| cor nar | rect information. ne and case numb | If more space per (if known). | is nee Answ | . If two married peopl ded, attach another sl er every question. | | | | | | | |
| | | ibe Your Ho | user | 1010 | | | | | | | |
| 1. | Is this a joint cas | se? | | | | | | | | | |
| 2. | No | Debtor 2 live in o es. Debtor 2 mu | ıst file | oarate household? Official Form 106J-2, E | Expenses fo | r Separate Housel | nold of | Debtor | 2. | | |
| ۷. | Do not list Debtor | | | No Yes. Fill out this inform for each dependent | ialion – | ependent's relation | | o to | Dependent's age | Does depe | |
| | Debtor 2. | | | or cacif dependent | | on; college stud | dent | | 20 | ☐ No | |
| | Do not state the c | lependents' | | | | on | | | 16 | Yes No | |
| | | | | | _ | | | | | − 🔽 Yes | |
| | | | | | _ | | | | | - □ No - □ Yes | |
| | | | | | | | | | | ☐ No | |
| | | | | | _ | | | | | − ☐ Yes | |
| | | | | | _ | | | | | − ∏ No − ∏ Yes | |
| 3. | Do your expense expenses of peo yourself and you | ple other than | ? | ✓ No ☐ Yes | | | | | | П | |
| Р | art 2: Estim | ate Your On | goin | g Monthly Expens | ses | | | | | | |
| to r | | s of a date afte | r the b | uptcy filing date unles pankruptcy is filed. If | - | _ | | - | • | | |
| | | | | government assistand Schedule I: Your Incor | - | | | | Your expen | ses | |
| 4. | | | | uses for your residenc may rent for the ground o | | | | 4 | 4. | \$41 | 0.53 |
| | If not included in | | | , | | | | | | | |
| | 4a. Real estate t | taxes | | | | | | 4 | 1a | | |
| | 4b. Property, ho | meowner's, or r | enter's | insurance | | | | 4 | 4b | | |
| | 4c. Home maint | enance, repair, | and u | okeep expenses | | | | 4 | 4c | | |
| | 4d. Homeowner' | s association o | r cond | ominium dues | | | | 4 | 1d. | \$32 | 2.91 |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 33 of 51

| Deb | otor 1 Shela Rangoonwala | Case number (if known) | |
|-----|---|------------------------|----------|
| | | Your expenses | <u> </u> |
| 5. | Additional mortgage payments for your residence, such as home equity loans | 5. | |
| 6. | Utilities: | | |
| | 6a. Electricity, heat, natural gas | 6a. | \$50.00 |
| | 6b. Water, sewer, garbage collection | 6b | |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c | \$150.00 |
| | 6d. Other. Specify: | 6d | |
| 7. | Food and housekeeping supplies | 7. | \$500.00 |
| 8. | Childcare and children's education costs | 8. | |
| 9. | Clothing, laundry, and dry cleaning | 9. | \$100.00 |
| 10. | Personal care products and services | 10. | \$60.00 |
| 11. | Medical and dental expenses | 11. | \$80.00 |
| 12. | Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | \$130.00 |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$20.00 |
| 14. | Charitable contributions and religious donations | 14. | |
| 15. | Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| | 15a. Life insurance | 15a. | |
| | 15b. Health insurance | 15b. | |
| | 15c. Vehicle insurance | 15c. | \$123.00 |
| | 15d. Other insurance. Specify: | 15d. | |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 16. | |
| 17. | Installment or lease payments: | | |
| | 17a. Car payments for Vehicle 1 | 17a | \$127.18 |
| | 17b. Car payments for Vehicle 2 | 17b | |
| | 17c. Other. Specify: | 17c. | |
| | 17d. Other. Specify: | | |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | |
| 19. | Other payments you make to support others who do not live with you. Specify: | 19. | |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 34 of 51

| Deb | tor 1 | Shela Rangoonwala | Case number (if known) | |
|-----|------------|--|------------------------|------------|
| 20. | | r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income. | | |
| | 20a. | Mortgages on other property | 20a | |
| | 20b. | Real estate taxes | 20b | |
| | 20c. | Property, homeowner's, or renter's insurance | 20c | |
| | 20d. | Maintenance, repair, and upkeep expenses | 20d | |
| | 20e. | Homeowner's association or condominium dues | 20e | |
| 21. | Other | r. Specify: | 21. + _ | |
| 22. | Calcu | alate your monthly expenses. | <u></u> | |
| | 22a. | Add lines 4 through 21. | 22a | \$2,073.62 |
| | 22b. | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. | 22b | |
| | 22c. | Add line 22a and 22b. The result is your monthly expenses. | 22c | \$2,073.62 |
| 23. | Calcu | ulate your monthly net income. | | |
| | 23a. | Copy line 12 (your combined monthly income) from Schedule I. | 23a | \$2,133.00 |
| | 23b. | Copy your monthly expenses from line 22c above. | 23b. _ _ | \$2,073.62 |
| | 23c. | Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23c | \$59.38 |
| 24. | Do yo | ou expect an increase or decrease in your expenses within the year after you | file this form? | |
| | | xample, do you expect to finish paying for your car loan within the year or do you exent to increase or decrease because of a modification to the terms of your mortgage | | |
| | V | No. | | |
| | □ <i>\</i> | Yes. Explain here: None. | | |
| | | THE STATE OF THE S | | |
| | | | | |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 35 of 51

| Fill in this information to identify your case: |
|---|
| Debtor 1 Shela Rangoonwala |
| First Name Middle Name Last Name Debtor 2 (Sexual if filing) First Name |
| (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS |
| Case number |
| (if known) |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| P | art 1: Summarize Your Assets | |
|----|--|------------------------------------|
| | | Your assets Value of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) | |
| | 1a. Copy line 55, Total real estate, from Schedule A/B | \$10,148.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$12,175.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$22,323.00 |
| P | art 2: Summarize Your Liabilities | |
| | | Your liabilities Amount you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$107,852.88 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | + \$33,052.93 |
| | Your total liabilities | \$140,905.81 |
| P | art 3: Summarize Your Income and Expenses | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$2,133.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$2,073.62 |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 36 of 51

| Del | otor 1 | Shela Rangoonwala Case num | nber (if know | n) | |
|-----|--|---|---------------|----------------|------------------|
| P | art 4: | Answer These Questions for Administrative and Statistical Reco | ords | | |
| 6. | Are yo | ou filing for bankruptcy under Chapters 7, 11, or 13? | | | |
| | _ | lo. You have nothing to report on this part of the form. Check this box and submit this tes | form to the c | ourt with your | other schedules. |
| 7. | What | kind of debt do you have? | | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | | | | |
| | | our debts are not primarily consumer debts. You have nothing to report on this part nis form to the court with your other schedules. | of the form. | Check this bo | ox and submit |
| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$1,360.70 | | | | |
| 9. | Сору | the following special categories of claims from Part 4, line 6 of <i>Schedule E/F:</i> | | | |
| | | | Total cla | aim | |
| | From | Part 4 on Schedule E/F, copy the following: | | | |
| | 9a. D | domestic support obligations. (Copy line 6a.) | | \$0.00 | |
| | 9b. T | axes and certain other debts you owe the government. (Copy line 6b.) | | \$0.00 | |
| | 9c. C | claims for death or personal injury while you were intoxicated. (Copy line 6c.) | | \$0.00 | |
| | 9d. S | tudent loans. (Copy line 6f.) | | \$0.00 | |
| | | obligations arising out of a separation agreement or divorce that you did not report as riority claims. (Copy line 6g.) | | \$0.00 | |
| | Of D | lehts to pension or profit-sharing plans, and other similar dehts. (Copy line 6h.) | + | \$0.00 | |

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

\$0.00

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 37 of 51

| Fill in this inf | ormation to i | dentify your case | : | |
|---------------------------------|-------------------|---------------------------|----------------------------------|---|
| Debtor 1 | Shela | | Rangoonwala | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | |
| | | | | |
| United States Ba | nkruptcy Court fo | or the: NORTHERN D | ISTRICT OF ILLINOIS | |
| Case number (if known) | | | | Check if this is an amended filing |
| Official Form | 106Dec | | | |
| | | n dividual Dale | anla Calcadulas | 40/4 |
| Jeciaration | About an i | ndividuai Debi | or's Schedules | 12/1 |
| | or agree to pay | someone who is NOT | an attorney to help you fill out | bankruptcy forms? |
| | ama of norson | | | Attach Bankruptcy Petition Preparer's Notice, |
| Yes. Na | ame of person _ | | | Declaration, and Signature (Official Form 119). |
| Under penalt true and corr | | eclare that I have read | | iled with this declaration and that they are |
| | Rangoonwala | | Χ | |
| Shela Ran | goonwala, Debto | or 1 | Signature of Debtor 2 | |

Date **04/27/2017**

MM / DD / YYYY

MM / DD / YYYY

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 38 of 51

| if this is an ed filing |
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| erritory? to Rico, Texas, |
| |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 39 of 51

| Deb | otor 1 | Shela Rangoonwala | | Case nui | mber (if known) | |
|------|--|---|--------------------------------------|--|--------------------------------------|--|
| Р | art 2: | Explain the Sources of | Your Income | | | |
| 4. | Fill in th | u have any income from employ ne total amount of income you red re filing a joint case and you have | eived from all jobs and all b | ousinesses, including par | t-time activities. | calendar years? |
| | ☑ No ☐ Yes | s. Fill in the details. | | | | |
| 5. | Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1. | | | | | |
| | List eac | ch source and the gross income for | rom each source separately | . Do not include income | that you listed in line 4. | |
| | □ No ✓ Yes | s. Fill in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions | Sources of income Describe below. | Gross income from each source (before deductions and exclusions |
| Fro | m Janua | ry 1 of the current year until | Social Security | \$3,092.00 | | |
| | | ı filed for bankruptcy: | Child spt | \$4,528.00 | | |
| | | | One in Long continu | | | |
| | | calendar year: | Social Security Child spt | \$9,000.00 \$13,000.00 | | |
| (Jai | nuary 1 to | December 31, <u>2016</u>) | Jilliu spt | <u> </u> | | |
| For | the cale | ndar year before that: | Social Security | \$9,000.00 | | |
| | | December 31, 2015) | Child spt | \$13,000.00 | | |
| , | , | , 2010 / | | | | |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 40 of 51

| Debtor 1 | | Shela Ra | ngoonwala | Case number (if known) | | |
|--|-----------------------------------|--|---|--|--|--|
| Р | art 3: | List Ce | ertain Payments You Made Before You Filed fo | or Bankruptcy | | |
| 6. | Are eith | er Debtor | 1's or Debtor 2's debts primarily consumer debts? | | | |
| | □ No. | | Debtor 1 nor Debtor 2 has primarily consumer debts. Of by an individual primarily for a personal, family, or househ | 5 () | | |
| | | During t | the 90 days before you filed for bankruptcy, did you pay any | creditor a total of \$6,425* or more? | | |
| | | ☐ No. | Go to line 7. | | | |
| | | ☐ Yes. | List below each creditor to whom you paid a total of \$6,429 total amount you paid that creditor. Do not include payme child support and alimony. Also, do not include payments | nts for domestic support obligations, such as | | |
| | | * Subje | ct to adjustment on 4/01/19 and every 3 years after that for | cases filed on or after the date of adjustment. | | |
| | √ Yes. | Debtor | 1 or Debtor 2 or both have primarily consumer debts. | | | |
| During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? | | | | | | |
| No. Go to line 7. | | | | | | |
| | | ☐ Yes. | List below each creditor to whom you paid a total of \$600 creditor. Do not include payments for domestic support of Also, do not include payments to an attorney for this bank | oligations, such as child support and alimony. | | |
| 7. | Insiders corporat agent, in | include you ons of wh cluding or | ore you filed for bankruptcy, did you make a payment on our relatives; any general partners; relatives of any general pich you are an officer, director, person in control, or owner one for a business you operate as a sole proprietor. 11 U.S.Coort and alimony. | partners; partnerships of which you are a general partner; | | |
| | ✓ No ☐ Yes. | List all pa | ayments to an insider. | | | |
| 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? | | | | | | |
| | Include p | payments | on debts guaranteed or cosigned by an insider. | | | |
| | ✓ No ☐ Yes. | List all pa | ayments that benefited an insider. | | | |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 41 of 51

| Deb | tor 1 | Shela Rangoonwala | Case number (if known) |
|-----|----------------------|---|--|
| Pa | art 4: | Identify Legal Actions, Repossessions, and Foreclosur | es |
| 9. | List all s | year before you filed for bankruptcy, were you a party in any lawsuit uch matters, including personal injury cases, small claims actions, divorce tions, and contract disputes. | · |
| | ✓ No ☐ Yes | . Fill in the details. | |
| 10. | seized, | year before you filed for bankruptcy, was any of your property repos or levied? Il that apply and fill in the details below. | ssessed, foreclosed, garnished, attached, |
| | | Go to line 11. Fill in the information below. | |
| 11. | | 00 days before you filed for bankruptcy, did any creditor, including a l s from your accounts or refuse to make a payment because you owe | · |
| | ✓ No ☐ Yes | . Fill in the details. | |
| 12. | | year before you filed for bankruptcy, was any of your property in the s, a court-appointed receiver, a custodian, or another official? | e possession of an assignee for the benefit of |
| | ✓ No ☐ Yes | | |
| P | art 5: | List Certain Gifts and Contributions | |
| 13. | Within 2 | 2 years before you filed for bankruptcy, did you give any gifts with a to | otal value of more than \$600 per person? |
| | ✓ No ☐ Yes | . Fill in the details for each gift. | |
| 14. | Within 2 to any o | ? years before you filed for bankruptcy, did you give any gifts or conti harity? | ibutions with a total value of more than \$600 |
| | ✓ No ☐ Yes | . Fill in the details for each gift or contribution. | |
| Pa | art 6: | List Certain Losses | |
| 15. | | year before you filed for bankruptcy or since you filed for bankruptc saster, or gambling? | y, did you lose anything because of theft, fire, |
| | ✓ No ☐ Yes | . Fill in the details. | |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 42 of 51

| Debtor 1 Shela Rangoonwala | | Case number (if known) | | | | | | |
|---|---------------|------------------------|-----------|-------------------|---|--|---|-------------------|
| P | art 7: | List Cer | tain P | ayments or | Transfers | | | |
| 16. | | - | - | | ptcy, did you or anyone nkruptcy or preparing a | else acting on your behalf pay bankruptcy petition? | or transfer any pro | perty to |
| | Include | any attorney | s, bankı | ruptcy petition p | oreparers, or credit couns | eling agencies for services requi | red for your bankrupt | су. |
| | □ No ✓ Yes | s. Fill in the o | details. | | | | | |
| | bert J. A | Adams & As | ssociat | es | Description and value | of any property transferred | Date payment or transfer was made | Amount of payment |
| | | kson, Suite | e 202 | | | | 04/24/2017 | \$65.00 |
| Num | nber Str | eet | | | _ | | | _ |
| | | | | | _ | | | _ |
| Chi | icago | | IL | 60607 | _ | | | |
| City | | | State | ZIP Code | | | | |
| Ema | il or websit | e address | | | _ | | | |
| Dava | an Mha M | lada tha Daywa | mt if Not | Vau | _ | | | |
| | | lade the Payme | | | intev did vou or anyone | else acting on your behalf pay | or transfer any pro | perty to |
| 17. | | - | - | | | make payments to your credite | | perty to |
| | Do not i | nclude any p | ayment | or transfer that | t you listed on line 16. | | | |
| | ✓ No ☐ Yes | s. Fill in the o | details. | | | | | |
| 18. | | - | - | | uptcy, did you sell, trad | e, or otherwise transfer any pro financial affairs? | operty to anyone, ot | her than |
| Include both outright transfers and transfers made as security (such as granting of a security interest on Do not include gifts and transfers that you have already listed on this statement. | | | | | or mortgage on your | property). | | |
| | ✓ No ☐ Yes | s. Fill in the o | details. | | | | | |
| 19. | | - | - | | ruptcy, did you transfer n called asset-protection o | any property to a self-settled t levices.) | rust or similar devi | e of which |
| | ✓ No ☐ Yes | s. Fill in the o | details. | | | | | |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 43 of 51

| Debtor 1 | | Shela Rangoonwala | Case number (if known) | | |
|----------|-----------------|---|---|--|--|
| P | art 8: | List Certain Financial Accounts, Instruments, Safe Depo | sit Boxes, and Storage Units | | |
| 20. | | l year before you filed for bankruptcy, were any financial accounts or i closed, sold, moved, or transferred? | nstruments held in your name, or for your | | |
| | Include | checking, savings, money market, or other financial accounts; certificates of pension funds, cooperatives, associations, and other financial institutions. | of deposit; shares in banks, credit unions, brokerage | | |
| | ✓ No ☐ Yes | . Fill in the details. | | | |
| 21. | - | now have, or did you have within 1 year before you filed for bankruptc ırities, cash, or other valuables? | y, any safe deposit box or other depository | | |
| | ✓ No ☐ Yes | . Fill in the details. | | | |
| 22. | ✓ No | ou stored property in a storage unit or place other than your home with . Fill in the details. | in 1 year before you filed for bankruptcy? | | |
| P | art 9: | Identify Property You Hold or Control for Someone Else | | | |
| 23. | - | hold or control any property that someone else owns? Include any proin trust for someone. | operty you borrowed from, are storing for, | | |
| | ✓ No ☐ Yes | . Fill in the details. | | | |
| P | art 10: | Give Details About Environmental Information | | | |
| For | the purp | ose of Part 10, the following definitions apply: | | | |
| ı | าazardoเ | nental law means any federal, state, or local statute or regulation concus or toxic substance, wastes, or material into the air, land, soil, surface statutes or regulations controlling the cleanup of these substances, w | e water, groundwater, or other medium, | | |
| | | ns any location, facility, or property as defined under any environment or used to own, operate, or utilize it, including disposal sites. | al law, whether you now own, operate, or | | |
| | | <i>is material</i> means anything an environmental law defines as a hazardo e, hazardous material, pollutant, contaminant, or similar item. | us waste, hazardous substance, toxic | | |
| Rep | ort all no | otices, releases, and proceedings that you know about, regardless of w | then they occurred. | | |
| 24. | Has any law? | governmental unit notified you that you may be liable or potentially lia | able under or in violation of an environmental | | |
| | ✓ No ☐ Yes | . Fill in the details. | | | |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 44 of 51

| Deb | otor 1 | Shela Rangoonwala | Case number (if known) |
|---------------------|---|---|---|
| 25. | ☑ No | ou notified any governmental unit of any r | elease of hazardous material? |
| 26. | Have you | ou been a party in any judicial or administ | rative proceeding under any environmental law? Include settlements and |
| | ✓ No ☐ Yes | . Fill in the details. | |
| Р | art 11: | Give Details About Your Busines | ss or Connections to Any Business |
| 27. | Within 4 | - | d you own a business or have any of the following connections to any |
| | | A sole proprietor or self-employed in a trad A member of a limited liability company (LL A partner in a partnership An officer, director, or managing executive An owner of at least 5% of the voting or eq | of a corporation |
| | <u> </u> | None of the above applies. Go to Part 12. Check all that apply above and fill in the d | etails below for each business. |
| 28. | | e years before you filed for bankruptcy, di acial institutions, creditors, or other partie | d you give a financial statement to anyone about your business? Include s. |
| | □ No □ Yes | . Fill in the details below. | |
| Р | art 12: | Sign Below | |
| thar pro or t | t answers perty by both. 18 /s/ Shela Shela Rai | s are true and correct. I understand that r fraud in connection with a bankruptcy cas U.S.C. §§ 152, 1341, 1519, and 3571. | Affairs and any attachments, and I declare under penalty of perjury making a false statement, concealing property, or obtaining money or see can result in fines up to \$250,000, or imprisonment for up to 20 years, X Signature of Debtor 2 Date |
| | | 04/2//2017 | Date |
| ☑ | - | ch additional pages to Your Statement of | Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| Did | you pay | or agree to pay someone who is not an a | ttorney to help you fill out bankruptcy forms? |
| | | me of person | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 45 of 51

| Fill in this information to identify your case: | | | | | |
|---|------------|-------------|-------------|--|--|
| Debtor 1 | Shela | | Rangoonwala | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | | | | | |
| Case number (if known) | | | | | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

 For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | | | What do you intend to do with the property that secures a debt? | | Did you claim the property as exempt on Schedule C? | |
|---|---------------------------|--|--|--|---|--|
| Creditor's name: | Chase Home Finance | | Surrender the property. Retain the property and redeem it. | | No Yes | |
| Description of property securing debt: | mortgage | | Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | | | |
| Creditor's name: | Toyota Financial Services | | Surrender the property. Retain the property and redeem it. | | No Yes | |
| Description of property securing debt: | 2012 Toyota Prius Hybrid | | Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | | | |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 46 of 51

| De | btor 1 | Shela Rang | oonwala | | Case number (if known | n) |
|---|-----------|----------------|---|---------------------------|--|-----------------------------|
| i | Part 2: | List Your | Unexpired Persona | l Property Leases | | |
| fill | in the in | formation belo | w. Do not list real estate | e leases. Unexpired lease | Executory Contracts and Unexpessions are leases that are still in efustee does not assume it. 11 | • |
| | Descri | ibe your unexp | ired personal property le | eases | | Will this lease be assumed? |
| | Lessor | r's name: | Ong Kogen, Inc. | | | □ No |
| Description of leased Condo Associatoin property: | | | | | ☑ Yes | |
| j | Part 3: | Sign Belo | ow . | | | |
| | | | ry, I declare that I have in is subject to an unexpire | • | out any property of my estate t | that secures a debt and |
| Χ | /s/ She | la Rangoonw | ala | X | | |
| | Shela Ra | angoonwala, De | ebtor 1 | Signature of Debto | r 2 | |
| | Date 0 | 4/27/2017 | | Date | | |
| | M | IM / DD / YYYY | _ | MM / DD / Y | YYY | |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 47 of 51

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

| In | re Shela Rangoonwala | Case No. | |
|----|--|------------------------|---------------------------------|
| | | Chapter | 7 |
| | DISCLOSURE OF COMPENSATION OF AT | TORNEY FOR | DEBTOR |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I a that compensation paid to me within one year before the filing of the petition services rendered or to be rendered on behalf of the debtor(s) in contemplais as follows: | n in bankruptcy, or a | agreed to be paid to me, for |
| | For legal services, I have agreed to accept | \$2 | 2,000.00 |
| | Prior to the filing of this statement I have received | | \$65.00 |
| | Balance Due | \$1 | 1,935.00 |
| 2. | The source of the compensation paid to me was: Debtor Other (specify) | | |
| 3. | The source of compensation to be paid to me is: | | |
| | ✓ Debtor ☐ Other (specify) | | |
| 4. | ☑ I have not agreed to share the above-disclosed compensation with any associates of my law firm. | other person unle | ss they are members and |
| | I have agreed to share the above-disclosed compensation with anothe associates of my law firm. A copy of the agreement, together with a list compensation, is attached. | • | |
| 5. | In return for the above-disclosed fee, I have agreed to render legal service | for all aspects of the | e bankruptcy case, including: |
| | a. Analysis of the debtor's financial situation, and rendering advice to the d bankruptcy; | ebtor in determining | g whether to file a petition in |
| | b. Preparation and filing of any petition, schedules, statements of affairs an | nd plan which may b | pe required; |
| | c. Representation of the debtor at the meeting of creditors and confirmation | n hearing, and any | adjourned hearings thereof; |

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 48 of 51

| B2030 (| Form | 2030) | (12/15) |
|---------|------|-------|---------|
| | | | |

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

04/27/2017 /s/ Robert J. Adams & Associates

Date

Robert J. Adams & Associates
Robert J Adams & Associates
901 W Jackson Suite 202

Chicago, IL 60607 Phone: (312) 346-0100 / Fax: (312) 346-6228

Bar No. 0013056

/s/ Shela Rangoonwala

Shela Rangoonwala

Case 17-13696 Doc 1 Filed 05/01/17 Entered 05/01/17 12:47:05 Desc Main Document Page 49 of 51

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

IN RE: Shela Rangoonwala CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

| | The above named Debtor hereby verifies that the | attached | ist of creditors is true and correct to the best of his/her |
|--------|---|-----------|---|
| know | edge. | | |
| | | | |
| | | | |
| Date . | 4/27/2017 | Signature | /s/ Shela Rangoonwala |
| | | J | Shela Rangoonwala |
| | | | |

Bank of America PO Box 1598 Norfolk, VA 23501

Best Buy HRS USA P.O.Box 17298 Baltimore, MD 21297-1298

Capital One 15000 Capital One Richmond, VA 23238

Chase Bank One Card Service 800 Brooksedge Blvd Westerville, OH 43081

Chase Home Finance PO Box 509011 San Diego, CA 92150

First Bank PO Box 790269 Saint Louis, MO 63179

First Midwest Bank P.O.Box 9003 Gurnee, IL 60031

Home Depot Credit Services Processing Center PO Box 80084 Des Moines, IA 50364

IRS PO Box 21126 Philadelphia, PA 19114 IRS Mail Stop 5010 CHI Chicago, IL 60604

IRS Assoc. Area Counsel, SB/SE 200 W. Adams, Ste. 2300 Chicago, IL 60606-5208

Kohls Department Store N56W17000 Ridgewood Menomonee Falls, WI 53051

Long Kogen, Inc. 7249 N. Western Ave Chicago, IL 60645

Ong Kogen, Inc. 7249 N. Western Ave Chicago, IL 60645

Sears Premier Card P.O Box 183081 Columbus, OH 43218

Target PO Box 9475 Minneapolis, MN 55440

Toyota Financial Services P.O.Box 5855 Carol Stream, IL 60197-5855

Walmart PO Box 530929 Atlanta, GA 30353-0929